

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO,
IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION
OF RIGHTS TO THE USE OF WATER FROM
THE SNAKE RIVER BASIN WATER SYSTEM.

CIVIL CASE NUMBER: 39576

Ident. Number: A72-04055

Date Received:

Receipt No: X777777

Received By: _____

NOTICE OF CLAIM TO A WATER RIGHT
ACQUIRED UNDER STATE LAW

1. Name: SPLIT RIGHT

Address:

NA, ID

0000

2. Date of Priority: APR 15, 1885

3. Source: SALMON RIVER
SPLIT RIGHT

Trib. to: SNAKE RIVER

4. Point of Diversion:

Township	Range	Section	1/4 of	1/4 of	1/4	Lot	County
13N	19E	16	NE	NE	NE	1	CUSTER

5. Description of diverting works:

DITCH, GRAVITY IRRIGATION SYSTEM

6. Water is used for the following purposes:

Purpose	From	To	C.F.S	(or)	A.F.A.
IRRIGATION	04/15	10/30	7.000		

7. Total Quantity Appropriated is:

7.000 C.F.S. (and/or)

A.F.A.

8. Total consumptive use is

Acre Feet Per Annum.

9. Non-irrigation uses:

10. Place of Use:

Township	Range	Section	1/4 of	1/4	Lot	Use	Acres
13N	19E	3	NE	NE		IRR	5.0
			NW	NE		IRR	28.0
			SW	NE		IRR	3.0

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Date: 11/29/89

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MICROFILMED

MAR 19 1993

10. Place of Use: Continued

Township	Range	Section	1/4	of	1/4	Lot	Use	Acres
13N	19E	3	SE		NE		IRR	29.0
			NE		NW		IRR	40.0
			NW		NW		IRR	37.0
			SW		NW		IRR	18.0
			SE		NW		IRR	8.0
			NW		SW		IRR	6.0
							Section Acres	174.0
		4	NE		NE		IRR	5.0
			SE		NE		IRR	11.0
							Section Acres	16.0
		14N	19E	34	NE		SW	
NW					SW		IRR	2.0
SW					SW		IRR	17.0
SE					SW		IRR	40.0
SW					SE		IRR	4.0
							Section Acres	80.0
					Total Acres	270.0		

11. Place of use in counties: CUSTER

12. Do you own the property listed above as place of use? YES

13. Other Water Rights Used:

14. Remarks:

THIS RIGHT HAS BEEN SPLIT

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A72-04055A - J. HAMMOND CLAIMS 57"1.14CFS FOR 27 ACRES

A72-04055B - S. FARR CLAIMS 293" 5.86CFS FOR 140 ACRES

15. Basis of Claim:

16. Signature(s)

(a.) By signing below, I/We acknowledge that I/We have received, read and understand the form entitled "How you will receive notice in the Snake River Basin Adjudication." (b.) I/We do _____ do not _____ wish to receive and pay a small annual fee for monthly copies of the docket sheet.

Number of attachments: _____

For Individuals:

I/We do solemnly swear or affirm that the statements contained in the foregoing document are true and correct.

Signature of Claimant(s): _____ Date: _____
_____ Date: _____

State of Idaho)
County of _____) SS.

Subscribed and sworn (or affirmed) before me this _____ day
of _____ 19 _____
Notary Public

Seal

Residing at _____
My Commission Expires _____